



Town of Burlington



SIMPLE. SAFE. SMART.



SIGN UP TODAY

Medications FREE to your door!
See reverse for a full list of medications.

CANARX is a voluntary international mail order prescription program that is available to eligible employees, retirees and their dependents of the Town of Burlington, MA.

Brand name medications, in the original factory-sealed manufacturers packaging, are delivered DIRECT TO YOUR DOOR from certified pharmacies in Canada, the United Kingdom and Australia. YOU PAY NOTHING thanks to the savings CANARX brings to your plan.

Getting started is super easy!

1. Check to see if a medication is offered. Call **1-866-893-6337** and speak with a CANARX representative or view the complete formulary and print enrollment material at www.canarx.com (WebID: **BURLINGTON**).
2. Ask your doctor for a prescription for a 3-month supply, with 3 refills.
3. Submit documentation (completed enrollment form, prescription and a copy of your photo ID).
4. Sit back and relax...medication will be mailed direct to your home within 4 weeks!

- ✓ **\$0 Copay**
- ✓ **450+ FREE Brand Name Medications**
- ✓ **Easy, convenient refills**
- ✓ **Refills only, no "new to you" meds**
- ✓ **No additional costs**

For More Information



1-866-893-6337
www.canarx.com
WebID: BURLINGTON

July 2023

ACIPHEX 20MG	CADUET 10/20MG	EXFORGE HCT 160/25/5MG	KEPPRA (G) 1000MG	PREMPRO 0.3MG/1.5MG	TOBREX OINT 0.3%
ACTONEL 35MG	CADUET 10/40MG	EXFORGE HCT 160/25/10MG	KERENDIA 10MG	PRESTALIA 3.5MG/2.5MG	TOLAK 4%
ACTONEL 150MG	CADUET 10/80MG	EXFORGE HCT 320/25/10MG	KERENDIA 20MG	PRESTALIA 7MG/5MG	TOPICORT CREAM 0.25%
ACTOPLUS 15MG-850MG	CELEBREX 100MG	FARESTON 60MG	KISQALI 200MG	PRESTALIA 14MG/10MG	TOVIAZ 4MG
ACTOS (G) 15MG	CELEBREX 200MG	FARXIGA 5MG	KOMBIGLYZE XR	PREZISTA 800MG	TOVIAZ 8MG
ACTOS (G) 30MG	CEQUA 0.09%	FARXIGA 10MG	2.5MG/1000MG	PRISTIQ 50MG	TRADJENTA 5MG
ACTOS (G) 45MG	CLIMARA PATCH 25MCG	FELDENE 10MG	KOMBIGLYZE XR	PRISTIQ 100MG	TRELEGY ELLIPTA
ACZONE 5%	CLIMARA PATCH 50MCG	FELDENE 20MG	5MG/500MG	PROMETRIUM 100MG	100-62.5-25MCG
ADCIRCA (G) 20MG	CLIMARA PATCH 75MCG	FETZIMA 20MG	KOMBIGLYZE XR	PROTOPIC OINT 0.03%	TRELEGY ELLIPTA
ADVAIR DISKUS 100MCG	CLIMARA PATCH 100MCG	FETZIMA 40MG	5MG/1000MG	PROTOPIC OINT 0.1%	200-62.5-25MCG
ADVAIR DISKUS 250MCG	COMBIGAN 0.2-0.5%	FETZIMA 80MG	LAMICTAL (G) 200MG	QTERN 10-5MG	TRINTELLIX 5MG
ADVAIR DISKUS 500MCG	COMBIVENT RESPIMAT	FETZIMA 120MG	LATUDA 20MG	QVAR REDIHALER 40MCG	TRINTELLIX 10MG
ADVAIR HFA 45/21MCG	20MCG/100MCG	FINACEA GEL 15%	LATUDA 40MG	QVAR REDIHALER 80MCG	TRINTELLIX 20MG
ADVAIR HFA 115/21MCG	COMTAN 200MG	FLAREX 0.1%	LATUDA 60MG	RANEXA 500MG	TRIUMEQ 600-50-300MG
ADVAIR HFA 230/21MCG	CORGARD 80MG	FLOVENT 44MCG	LATUDA 80MG	RAPAFLO 4MG	TUDORZA PRESSAIR 400MCG
AFINITOR 2.5MG	COSOPT PF 2%/0.5%	FLOVENT 110MCG	LATUDA 120MG	RAPAFLO 8MG	UCERIS 9MG
AFINITOR 5MG	CRESTOR (G) 5MG	FLOVENT 220MCG	LEXIVA 700MG	RAPAMUNE 0.5MG	ULORIC 80MG
AFINITOR 10MG	CRESTOR (G) 10MG	FLOVENT DISKUS 100MCG	LIALDA 1.2GM	RAPAMUNE 1MG	UROKIT-K 10MEQ
AKLIEF 50MCG/G	CRESTOR (G) 20MG	FLOVENT DISKUS 250MCG	LINZESS 72MCG	RAPAMUNE 2MG	URSO 250MG
ALOMIDE 0.1%	CRESTOR (G) 40MG	FOSAMAX PLUS D	LINZESS 145MCG	RELPAK 20MG	VAGIFEM 10MCG
ALPHAGAN-P 0.15%	CRINONE GEL 8%	70MG-2800IU	LINZESS 290MCG	RELPAK 40MG	VALTRELX (G) 1000MG
ALREX 0.2%	CYMBALTA (G) 20MG	FOSAMAX PLUS D	LIPITOR (G) 10MG	RENAGEL 800MG	VECTICAL 3MCG/GM
ALVESCO 80MCG	CYMBALTA (G) 30MG	70MG-5600IU	LIPITOR (G) 20MG	RENVELA (G) 800MG	VELPHORO 500MG
ALVESCO 160MCG	CYMBALTA (G) 60MG	FOSRENOL CHEW 500MG	LIPITOR (G) 40MG	RESTASIS MULTIDOSE 0.05%	VENTOLIN HFA 90MCG
AMPYRA 10MG	CYTOTEC (G) 200MCG	FOSRENOL CHEW 750MG	LIPITOR (G) 80MG	RESTASIS VIALS 0.05%	VESICARE (G) 5MG
ANAPROX DS 550MG	DALIRESP 500MCG	FOSRENOL CHEW 1000MG	LOTEMAX GEL 0.5%	RETIN A MICRO GEL PUMP	VESICARE (G) 10MG
ANORO ELLIPTA 62.5/25MCG	DEPAKOTE 250MG	FOSRENOL POWDER 750MG	LOTEMAX OINT 0.5%	0.04%	VIIBRYD 10MG
APTOM 200MG	DEPAKOTE 500MG	FOSRENOL POWDER 1000MG	LOTEMAX SUSP 0.5%	RETIN-A MICRO GEL PUMP	VIIBRYD 20MG
APTOM 400MG	DETROL LA 2MG	GENVOYA	LUMIGAN 0.01%	0.1%	VIIBRYD 40MG
APTOM 600MG	DETROL LA 4MG	GILENYA 0.5MG	MESTINON TS 180MG	REXULTI 0.25MG	VIMOVO 375/20MG
APTOM 800MG	DEXILANT DR 30MG	GLUCAGEN HYPOKIT 1MG	METRO CREAM 0.75%	REXULTI 0.5MG	VIMOVO 500/20MG
ARNUITY ELLIPTA 100MCG	DEXILANT DR 60MG	GLUMETZA ER 1000MG	METROGEL PUMP 1%	REXULTI 1MG	VIREAD (G) 300MG
ARNUITY ELLIPTA 200MCG	DIFFERIN CREAM 0.1%	GLYXAMBI 10MG/5MG	MIGRANAL 4MG/ML	REXULTI 2MG	VIVELLE-DOT 25MCG
AROMASIN 25MG	DIFFERIN GEL 0.3%	GLYXAMBI 25MG/5MG	MIRVASO 0.33%	REXULTI 3MG	VIVELLE-DOT 37.5MCG
ARTHROTEC 50MG	DIOVAN (G) 40MG	HEPSERA (G) 10MG	MOTEGRITY 1MG	REXULTI 4MG	VIVELLE-DOT 50MCG
ARTHROTEC 75MG	DIOVAN (G) 80MG	IBRANCE 75MG	MOTEGRITY 2MG	RINVOQ 15MG	VIVELLE-DOT 75MCG
ASTAGRAF XL 1MG	DIOVAN (G) 160MG	IBRANCE 100MG	MULTAQ 400MG	RINVOQ 30MG	VIVELLE-DOT 100MCG
ASTAGRAF XL 5MG	DIOVAN (G) 320MG	IBRANCE 125MG	MYRBETRIQ 25MG	RYBELSUS 3MG	VIVELLE-DOT 50MCG
ATACAND 4MG	DIOVAN HCT (G) 320/25MG	IMITREX NASAL SPRAY 5MG	MYRBETRIQ 50MG	RYBELSUS 7MG	VIVELLE-DOT 75MCG
ATACAND 8MG	DIPROLENE OINT 0.05%	IMITREX NASAL SPRAY 20MG	NAMENDA 10MG	RYBELSUS 14MG	VIVELLE-DOT 100MCG
ATACAND 16MG	DIVIGEL 0.25MG	IMITREX STATDOSE	NATAZIA 3/2-2/2-3/1MG	SAPHRIS 5MG	VRAYLAR 1.5MG
ATACAND 32MG	DIVIGEL 0.5MG	6MG/0.5ML	NESINA 6.25MG	SAPHRIS 10MG	VRAYLAR 3MG
ATACAND HCT 32MG/25MG	DIVIGEL 1MG	IMURAN (G) 50MG	NESINA 12.5MG	SENSIPAR (G) 30MG	VRAYLAR 4.5MG
ATACAND HCT 16MG/12.5MG	DOVATO 50MG-300MG	INCRUSE ELLIPTA 62.5MCG	NESINA 25MG	SENSIPAR (G) 60MG	VRAYLAR 6MG
ATACAND HCT 32MG/12.5MG	DULERA 100MCG/5MCG	INSPIRA 25MG	NEUPRO 1MG	SEREVENT DISKUS 50MCG	VUMERITY 231MG
ATROVENT HFA 20UG	DULERA 200MCG/5MCG	INSPIRA 50MG	NEUPRO 2MG	SIMBRINZA 1%/0.2%	VYTORIN 10/10MG
AUBAGIO 14MG	DUOBRII 0.01%-0.045%	INVEGA 3MG	NEUPRO 3MG	SINGULAIR (G) 10MG	VYTORIN 10/20MG
AVODART (G) 0.5MG	DYMISTA 137/50MCG	INVEGA 6MG	NEUPRO 4MG	SLYND 4MG	VYTORIN 10/40MG
AZILECT 0.5MG	EDARBI 40MG	INVEGA 9MG	NEUPRO 6MG	SOOLANTRA 1%	VYTORIN 10/80MG
AZILECT 1MG	EDARBI 80MG	INVOKAMET 50MG-500MG	NEUPRO 8MG	SPIRIVA 18MCG	WAKIX 4.5MG
AZOPT 1%	EDARBYCLOR 40MG/12.5MG	INVOKAMET 50MG-1000MG	NEVANAC 3MG/ML	SPIRIVA RESPIMAT 2.5MCG	WAKIX 17.8MG
BANZEL 200MG	EDARBYCLOR 40MG/25MG	INVOKAMET 150MG-500MG	NEXAVAR 200MG	STEGLUJAN 5MG-100MG	WELCHOL 625MG
BANZEL 400MG	EDECIN 25MG	INVOKAMET 150MG-1000MG	NEXIUM (G) 20MG	STEGLUJAN 15MG-100MG	WELLBUTRIN XL (G) 150MG
BECONASE AQ 42MCG	EDURANT 25MG	INVOKANA 100MG	NEXIUM (G) 40MG	STIOLTO RESPIMAT	WELLBUTRIN XL (G) 300MG
BENICAR 20MG	EFFIENT (G) 5MG	INVOKANA 300MG	NEXLETOL 180MG	2.5/2.5MCG	XADAGO 50MG
BENICAR 40MG	EFFIENT (G) 10MG	IRESSA 250MG	NEXLIZET 180MG-10MG	STRATTERA 10MG	XADAGO 100MG
BENICAR HCT 20MG/12.5MG	ELIDEL 1%	ISENTRESS 400MG	NORITATE CREAM 1%	STRATTERA 18MG	XALATAN 50MCG/ML
BENICAR HCT 40MG/12.5MG	ELIQUIS 2.5MG	JAKAFI 5MG	NORVASC (G) 5MG	STRATTERA 25MG	XARELTO 2.5MG
BENICAR HCT 40MG/25MG	ELIQUIS 5MG	JAKAFI 10MG	NORVASC (G) 10MG	STRATTERA 40MG	XARELTO 10MG
BENZACLIN GEL	ELMIRON 100MG	JAKAFI 15MG	NUBEQA 300MG	STRATTERA 60MG	XARELTO 15MG
BEPREVE 1.5%	ENTRESTO 24MG-26MG	JAKAFI 20MG	NURTEC ODT 75MG	STRATTERA 80MG	XARELTO 20MG
BETIMOL 0.25%	ENTRESTO 49MG-51MG	JALYN 0.5MG/0.4MG	ODEFSEY	STRATTERA 100MG	XELJANZ 5MG
BETIMOL 0.5%	ENTRESTO 97MG-103MG	JANUMET 50/500MG	200MG-25MG-25MG	STRATTERA 100MG	XELJANZ 10MG
BETOPTIC S 0.25%	EPIDUO FORTE 0.3%/2.5%	JANUMET 50/1000MG	OLUMIANT 2MG	STRATTERA 100MG	XELJANZ XR 11MG
BEYAZ	EPIDUO GEL PUMP 0.1%/2.5%	JANUMET XR 50MG/500MG	OMNARIS 50MCG	STRATTERA 100MG	XENAZINE 25MG
BIJUVA 1MG-100MG	EPIPEN 0.3MG	JANUMET XR 50MG/1000MG	ONGLYZA 2.5MG	STRIVERDI RESPIMAT	XENICAL 120MG
BIKTARVY	EPIPEN JR 0.15MG	JANUMET XR 100MG/1000MG	ONGLYZA 5MG	2.5MCG	XIGDUO XR 5/1000MG
50MG-200MG-25MG	EPIVIR / HBV 100MG	JANUVIA 25MG	ORILISSA 150MG	SYMITUZA	XIGDUO XR 10/500MG
BINOSTO 70MG	EPZICOM (G) 600MG-300MG	JANUVIA 50MG	ORILISSA 200MG	SYNAREL NASAL	XIGDUO XR 10/1000MG
BREO ELLIPTA 100/25MCG	ESTROGEL 0.06%	JANUVIA 100MG	OSPHERA 60MG	SYNJARDY 5MG/500MG	XIIDRA 5%
BREO ELLIPTA 200/25MCG	EUCRISA 2%	JARDIANCE 10MG	PEPSTAT 30MG	SYNJARDY 12.5MG/500MG	YASMIN 28
BRILINTA 60MG	EVISTA 60MG	JARDIANCE 25MG	PENTASA 500MG	SYNJARDY 12.5MG/1000MG	YAZ 3/0.02MG
BRILINTA 90MG	EVOTAZ 300MG-150MG	JENTADUETO 2.5MG-500MG	PLAQUENIL 200MG	TASIGNA 150MG	YAZ 3/0.02MG
BYSTOLIC 2.5MG	EXELON 4.6MG/24HR	JENTADUETO 2.5MG-850MG	PLAVIX (G) 75MG	TASIGNA 200MG	ZELAPAR 1.25MG
BYSTOLIC 5MG	EXELON 9.5MG/24HR	JENTADUETO	PRADAXA 75MG	TASIGNA 200MG	ZETIA (G) 10MG
BYSTOLIC 10MG	EXELON 13.3MG/24HR	2.5MG-1000MG	PRADAXA 150MG	TASIGNA 200MG	ZIAGEN (G) 300MG
BYSTOLIC 20MG	EXFORGE 5/160MG	JULUCA 50MG-25MG	PRED FORTE 1%	TASIGNA 200MG	ZIANA 1.2%-0.025%
CADUET 5/10MG	EXFORGE 5/320MG	KAZANO 12.5/500MG	PREMARIN 0.3MG	TASIGNA 200MG	ZOMIG (G) 2.5MG
CADUET 5/20MG	EXFORGE 10/160MG	KAZANO 12.5/1000MG	PREMARIN 0.625MG	TASIGNA 200MG	ZOMIG NASAL SPRAY
CADUET 5/40MG	EXFORGE 10/320MG	KEPPRA (G) 250MG	PREMARIN 1.25MG	TASIGNA 200MG	5MG
CADUET 5/80MG	EXFORGE HCT 160/12.5/5MG	KEPPRA (G) 500MG	PREMARIN CREAM	TASIGNA 200MG	ZOMIG ZMT 2.5MG
CADUET 10/10MG	EXFORGE HCT 160/12.5/10MG	KEPPRA (G) 750MG	0.625MG/GM	TASIGNA 200MG	ZOVIRAX CREAM 5%

NOTE: Medication names appearing with (G) are available in a Generic version from your local or U.S. mail order pharmacy. This list is subject to change. Please call 1-866-893-6337 toll free to verify the availability of your medication through this program.